

Preliminary Information

Professional Development through this grant must be high-quality, teacher-developed or teacher-led professional development for prekindergarten to grade 12 computer science pedagogy and content.

Priority will be given to applicants that:

1. Do not currently offer computer science learning opportunities;
2. Serve socioeconomically disadvantaged school districts;
3. Prioritize student populations traditionally underrepresented in computer science;
4. Demonstrate a commitment to pursuing high-quality educator professional development that emphasizes integration of computer science into other course work and curricula or establishes or expands access to courses that offer college credit and other certificates of value, or both; and
5. Collaborate or partner with other entities, including but not limited to other local education agencies, the business community, nonprofit organizations and private entities.

District/SAU & Applicant Information

District/SAU Name

Click to Select

School Name(s) (Only Include school(s) involved in the anticipated PD)

County (Select all that apply)

- ☐ Androscoggin
- ☐ Aroostook
- ☐ Cumberland
- ☐ Franklin
- ☐ Hancock
- ☐ Kennebec
- ☐ Knox
- ☐ Lincoln
- ☐ Oxford
- ☐ Piscataquis
- ☐ Penobscot
- ☐ Sagadahoc
- ☐ Somerset
- ☐ Waldo
- ☐ Washington
- ☐ York

The following questions are for the District Applicant's Contact Person (*the person filling out this form*).

First and Last Name

District Role

Phone Number

Email Address

Professional Development Details

Please summarize the content of the professional development and the intended outcome as it applies to your school district.

Do you have a PD provider selected?

- ☐ Yes
- ☐ Not Yet

Would you like help finding a provider?

- ☐ No thanks, we have one in mind.
- ☐ Yes, please!

Who is the anticipated provider?

When is the PD being offered? (month/day/year)

What is the duration? (hours, days, etc.)

Who is the audience? (grade level, content area, etc.)

What is the style? (hands-on, lecture, workshop, etc.)

What is the modality? (choose all that apply)

- ☐ Virtual
- ☐ In-Person
- ☐ Asynchronous
- ☐ Synchronous

How will you evaluate the effectiveness of the PD?

Anticipated Budget

What is the total anticipated budget amount requested?

Please provide a brief narrative of how you anticipate this being expended.

Finishing Up

Superintendent Signature. Please sign in the box below.

×

SIGN HERE

clear

If there are any additional details that you would like to include in your application, please provide them here.

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